Secretaría Tribunal de Distrito de EU,

A quien pueda interesar:



Se incluye información de las profesoras, Aida M. Robles Machado y María M. Robles Machado relacionadas con la Ley Promesa, Título III: Reclamación del 28 de junio de 2018, Certificaciones del Sistema de Retiro para Maestros e Informes de Cambio del Personal Docente del Departamento de Educación de Puerto Rico.

Aida M. Robles Machado	María M. Robles Machado
 Case number: 1703283 	 Case Number: 170328
Claim number: 123602	Claim Number: 161640
 Date claim: June 28, 2018 	 Date Claim: July 25, 2018
Last 4 number of SS: 6919	Last 4 number of SS: 8670
 Celular number: 787-366-5124 	 Cellular number: 787-382-5131
 Claim amount: \$1,745. 00 monthly, 	787- 366-5124
for life.	 Basic of Claim
	7. Current or former employment with the
	Government of Puerto Rico.
	8. Claim Amount: \$1,204.74 monthly, for
	life.
	9. Pension Date: May 31, 1997.
	3a. Specific Agency: Department of
	Education of Puerto Rico. Teacher in
	different elementary schools.
	Science Coordinator in Scholar Manatí
	District of P.R
	3b. Dates of employment related to claim:
	September, 1965 to December, 1997
	3c. Last 4 number of SS: 8670.
BY:	3d. Nature Employment Claims: Pension
Profesora, Aida M. Robles Machado	3d. Pending of Legal Action: No

Case:17-03283-LTS Doc#:14155 Filed:08/28/20 Entered:09/02/20 13:29:46 Desc/Main

Document Page 2 of 3

Proof of Claim: 123602

Claimant: Robles Machado, Aida M.

INFORMATION REQUESTED TO PROCESS YOUR CLAIM

Instructions

Please answer all four (4) questions and any applicable sub-questions. Please include as much detail as possible in your responses. Your answers should provide <u>more</u> information than the initial proof of claim. For example, if you previously wrote as the basis for your claim "Ley 96," please elaborate now on what specific laws you are purporting to rely on, the year the law at issue was passed, and how and why you believe this particular law provides a basis for your claim. Additionally, if available and applicable to your claim, please provide:

- Copy of a pleading, such as a Complaint or an Answer;
- Any unpaid judgment or settlement agreement;
- Written notice of intent to file a claim with proof of mailing;
- Any and all documentation you believe supports your claim.

Please send the completed form and any supporting documents via **email** to <u>PRClaimsInfo@primeclerk.com</u>, or by **mail or hand delivery** to the following addresseses:

First Class Mail	Hand Delivery
Commonwealth of Puerto Rico Supplemental Information Processing Center c/o Prime Clerk, LLC	Commonwealth of Puerto Rico Supplemental Information Processing Center c/o Prime Clerk LLC
Grand Central Station, PO Box 4708	850 Third Avenue, Suite 412
New York, NY 10163-4708	Brooklyn, NY 11232

Questionnaire

- 1. What is the basis of your claim?
 - □ A pending or closed legal action with or against the Puerto Rican government
 - Current or former employment with the Government of Puerto Rico
 - Other (Provide as much detail as possible below. Attach additional pages if needed.)

side

2. What is the amount of your claim (how much money do you claim to be owed):

PENSION AMOUNT \$1745/mo FOR CIFE.

- 3. <u>Employment.</u> Does your claim relate to current or former employment with the Government of Puerto Rico?
 - □ No. Please continue to Question 4.
 - Yes. Answer Questions 3(a)-(d).

3(a). Identify the specific agency or department where you were or are employed:

DEPARTMENT OF EDUCATION, CENTRAL OFFICE, HATO REY



Casproof Claim	of Chaim: T 123602 c#:14155 Filed:08/28/20 Document Paç aant: Robles Machado, Aida M.	Entered:09/02/20 11:29:46 Desc: Main e 3 of 3
3(b).	Identify the dates of your employment related to	your claim: 1882 31, 2001
3(c).	Last four digits of your social security number:	6919
3(d).	What is the nature of your employment claims (select all applicable):
	Y Pension	,
	□ Unpaid Wages	
	□ Sick Days	
	□ Union Grievance	
	□ Vacation	
·	□ Other (Provide as much detail as possible.	Attach additional pages if necessary).
4. <u>Le</u> ≭	gal Action. Does your claim relate to a pendi	ng or closed legal action?
-	Yes. Answer Questions 4(a)-(f).	
4(a). I	dentify the department or agency that is a party	to the action.
4(b). I	dentify the name and address of the court or ago	ency where the action is pending:
4(c). C	Case number:	
4(d). T	Fitle, Caption, or Name of Case:	
4(e). S	status of the case (pending, on appeal, or conclud	
4 (f). D	o you have an unpaid judgment? Yes / No (C	ircle one)



If yes, what is the date and amount of the judgment?